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**DECLARATION FOR UTILITY OR** 

**DESIGN** PATENT APPLICATION

(37 CFR 1.63)

☑ Declaration

☐ Declaration

PTO/SB/01 (10-00) Approved for use through 10/31/2002. OMB 0651-0032

Thomas R. Baranowski

**/**638,240

U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE

120 P 249

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August 14, 2000

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Attorney Docket Number

**First Named Inventor** 

**Application Number** 

Filing Date

Submitted OR	Submitted after Initial	Group Art Unit	3727							
with Initial Filing	Filing (surcharge (37 CFR 1.16 (e)) required)	Examiner Nam	e							
As a below named inventor, I he	reby declare that:			<u> </u>						
My residence, mailing address, an	d citizenship are as state	d below next to my ha	me.							
I believe I am the original, first and	•	•		t and joint inventor (if plural						
names are listed below) of the sub										
CLOSURE CAP LINERS HA	VING OXYGEN BARR	IER PROPERTIES								
	(Titl	e of the Invention)								
the specification of which										
OR Is attached hereto	is attached hereto OR as United States Application Number or PCT International									
was filed on (MM/DD/YYYY)	08/14/00									
Application Number 09/638/240 and was amended on (MM/DD/YYYY) (if applicable).										
I hereby state that I have reviewed and understand the contents of the above identified specification, including the claims, as amended by any amendment specifically referred to above.										
I acknowledge the duty to disclose in-part applications, material informational filing date of the	mation which became ava	ilable between the fili	s defined in 37 CF ng date of the prio	R 1.56, including for continuation- r application and the national or						
I hereby claim foreign priority ben certificate, or 365(a) of any PCT i America, listed below and have certificate, or any PCT internations	international application v also identified below, by	which designated at le	ast one country of	ther than the United States of ation for patent or inventor's						
Prior Foreign Application Number(s)	Country	Foreign Filing Date (MM/DD/YYYY)	Priority Not Claimed	Certified Copy Attached? YES NO						
-										
☐ Additional foreign application	numbers are listed on a s	upplemental priority da	ata sheet PTO/SB	/02B attached hereto:						
I hereby claim the benefit under										
Application Number(s)		(MM/DD/YYYY)	Additional provisional application numbers are listed on a supplemental priority data sheet PTO/SB/02B attached hereto.							
			P10/5B/	UZD attached hereto.						

[Page 1 of 2]

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## **DECLARATION** — Utility or Design Pat nt Application

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Address	200 West Adams Street,	¥2850							
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Country	United States of America		Telephon	e (312)	236-850	)O ·	Fax 312-236-8176		
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NAME C	F SOLE OR FIRST INV	ENTOR:			A petiti	on has been fil	ed for this unsigned inventor		
Given Nam	ne niddle [if any]) Thomas R.		^		Family or Surn	D	wski		
Inventor's Signature	Inventor's 1/2 & Barancesta 2 NOV 2000								
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City	Chicago	State Illin	nois		ZIP (	50638	Country USA		
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## **DECLARATION**

## **ADDITIONAL INVENTOR(S)** Supplemental Sheet Page 1 of 1

		$\overline{}$							-		
Name of Additional Joint Inventor, if any:  A petition has been filed for this unsigned inventor								entor			
Given Na	)	Family Name or Surname									
James			Taber								
Inventor's Signature	Africota	h		14				160 2 , C Date	Date		
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Post Office Address											
City	Aurora	State	Illinois		ZIP	60504	Count	y US	A		
Name of Addition	nal Joint Inventor, if an	y:	[	<b>□</b> A	petitio	on has been file	ed for th	nis unsigr	ned inv	rentor	
Given Na	me (first and middle [if any]	)				Family Na	me or	Sumame			
Inventor's Signature								Da	te		
Residence: City		State		С	ountry			Citizer	nship		
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Name of Additional Joint Inventor, if any:  A petition has been filed for this unsigned inventor											
Given Name (first and middle [if any]) Family Name or Surname											
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